□ Exteriors

UNITED STATES DEPARTMENT OF THE INTERIOR NATIONAL PARK SERVICE

Denali National Park and Preserve Photography Permits Post Office Box 9, Denali Park, Alaska 99755

Application for Photography/Filming Permit - Long Form

Date	— PRMATION					Unit ¹ Unit
Company Name Address City/State/Zip Phone # FAX # Producer Insurance Co. Federal Tax No. or S	ocial Security No.	Applicant/Agent Address City/State/Zip Phone # Beeper # Photographer/Dire Name of Project/O	Client:			
☐ Feature Film /TV M	Stills, advertising stills, other Iovie TV Series/Pilot Docume	stock video/photo entary/Travelogue	□ Commer	cial	nd 🗆 `	Yes □N
Summary of scene	!(s)					
SITE INFORMAT Total number of days of Night work: No SHOOTING SCHE	on site: Shoot Prep	Strike Ho	old			
DATE	LOCATION.	Start	End	FILM	PREP	STRIKE
		Time	Time			

☐ Interior: Building name		
Set dressing or other structures proposed: No	☐ Yes, explain	
To request set construction, off-road activity, trincluding proposed Site Plan.	ail use, or interior use of building, att	ach detailed information
Electrical needs, explain	Generator: □ No □ Yes, size	Lighting:
None □ Reflectors only □ Yes (explain)		
Road:	Date/time:	□ Closure requested
☐ Running shots ☐ Driving shots ☐ Drive-bys ☐		
☐ Camera/Equipment on Road Shoulder ☐ Camera/E	•	
OPERATIONAL INFORMATION:		
Number of Personnel and Vehicles:		
Total Cast & Crew Personal Cars Larg	e Trucks Other Trucks Van	S
Camera Car Picture Cars Motor ho	mes Dressing Rooms	
Other Vehicles (explain)		
Base Camp location		
Catering Co. Name	Phone #	
CDECLAL A CENTERIO		
SPECIAL ACTIVITIES:		
Children: ☐ None ☐ Yes # of Children	Age Range	
Animals: ☐ None ☐ Yes (explain) Trainer Name:	Dlago	ъ. <i>Ш</i>
Aircraft: □ No □ Yes (explain)	FIIOIR	5 11
Special Effects: (identify)		
Effects Technician Name:	Phone #	
License # (if applicable)		
Stunts: (explain)		
Coordinator	Phone #	
Any other unusual or hazardous activities, explain		
Attach pages to provide additional information for	permit consideration.	
Person on location responsible for company's adhe	rence to all terms & conditions of Film	Permit:
Name:	Title:	Phone:
Person on location responsible for coordinating act		
Name:	Title:	Phone:
Person at the company office to contact for follow		
Name:		Phone:
I hereby state that the above information giver		o false or misleading

I hereby state that the above information given is complete and correct, and that no false or misleading information or false statements have been given. All estimates are reliable to the best of my knowledge and I have the full authority to represent the applicant/production company and the project described above.

Signature	Title	Date
Camanana Nama		

Company Name

Information provided will be used to determine whether a permit will be issued. Completed application must be accompanied by an application fee in the form of a cashiers check or money order in the amount of \$200.00 made payable to **National Park Service**. Application and administrative charges are non-refundable. *Mail completed application to Denali National Park and Preserve, Photography Permits, Post Office Box 9, Denali Park, Alaska 99755*.

Note that this is an application only, and does not serve as permission to conduct a filming project or any other use of the park. If your request is approved, a permit containing applicable conditions and regulations will be sent to the person designated on the application. The permit must be signed and returned to the park prior to the event.

The above application form is provided with the understanding that parks will insert appropriate park names and addresses as desired. In addition, parks are encouraged to request (under separate sheets) any additional information needed to address specific park needs.

Paperwork Reduction Act Statement: This information is being collected to allow the park manager to make a value judgment on whether or not to allow the requested use. All the applicable parts of the form must be completed.

Estimated Burden Statement: Public reporting burden for this form is estimated to average 60 minutes per response including the time it takes to read, review instructions and complete the form. Direct comments regarding this burden estimate or any aspects of this form to the National Park Service Program Manager, Special Park Uses, Ranger Activities Division, 1849 C Street, NW., Washington, D.C. 20240 and to the Information Collection Clearance Officer, Washington Administrative Program Center, 1849 C Street NW., Washington, D.C. 20240. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number.

